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CONFIRMATION NO. 8935

<b>SERIAL NUMBER</b> 10/614,944	<b>FILING OR 371(c) DATE</b> 07/08/2003 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b> P03,0260	
<b>APPLICANTS</b> Bernhard Scholz, Heroldsbach, GERMANY;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 102 30 813.6 07/08/2002					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 10/02/2003</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> 2/20/07 Examiner's Signature Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 2	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 26574					
<b>TITLE</b> Method for localizing at least one focal lesion in a biological tissue section					
<b>FILING FEE RECEIVED</b> 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		